

UTILITY PATENT APPLICATION TRANSMITTAL

*Submit an original and a duplicate for fee processing
(Only for new nonprovisional applications under 37 CFR 1.53(b))*

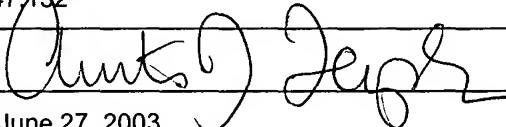
21707 U.S. PTO
107607933
06/27/03

ADDRESS TO:

**Mail Stop Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450**

Attorney Docket No. MBHB02-728-B (400/120)
First Named Inventor James McSwiggen
Express Mail No. EV 333565215 US

APPLICATION ELEMENTS	ACCOMPANYING APPLICATION PARTS
<p>1. <input checked="" type="checkbox"/> Transmittal Form with Fee</p> <p>2. <input checked="" type="checkbox"/> Specification (including claims and abstract) [Total Pages 149]</p> <p>3. <input checked="" type="checkbox"/> Drawings [Total Sheets 13]</p> <p>4. <input type="checkbox"/> Oath or Declaration [Total Pages]</p> <p>a. <input type="checkbox"/> Newly executed</p> <p>b. <input type="checkbox"/> Copy from prior application</p> <p>[Note Boxes 5 and 18 below]</p> <p>i. <input type="checkbox"/> <u>Deletion of Inventor(s)</u> Signed statement attached deleting inventor(s) named in the prior application</p> <p>5. <input type="checkbox"/> Incorporation by Reference: The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.</p> <p>6. <input type="checkbox"/> Computer Code Listing (See 1.96)</p> <p>a. <input type="checkbox"/> Microfiche Appendix</p> <p>b. <input type="checkbox"/> CD-Rom (in duplicate, with separate transmittal)</p> <p>7. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission</p> <p>a. <input type="checkbox"/> Computer Readable Copy</p> <p>b. <input type="checkbox"/> Paper Copy</p> <p>c. <input type="checkbox"/> Statement verifying above copies</p> <p>8. <input checked="" type="checkbox"/> Small Entity Status</p> <p><input checked="" type="checkbox"/> is claimed</p> <p><input type="checkbox"/> Statement filed in prior application; status still proper and desired</p> <p><input type="checkbox"/> is no longer claimed.</p>	<p>9. <input type="checkbox"/> Assignment Papers</p> <p>10. <input type="checkbox"/> Power of Attorney</p> <p>11. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>12. <input type="checkbox"/> Information Disclosure Statement (IDS)</p> <p><input type="checkbox"/> PTO-1449 Form</p> <p><input type="checkbox"/> Copies of IDS Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (Should be specifically itemized)</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s)</p> <p>16. <input type="checkbox"/> A Request for non-publication pursuant to 35 U.S.C. § 122(b)(2)(B)(i)</p> <p>17. <input checked="" type="checkbox"/> Other: Patent Application Data Sheet</p>
<p>18. <input checked="" type="checkbox"/> This is a CONTINUING APPLICATION. Please note the following:</p> <p>a. <input checked="" type="checkbox"/> This is a <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input checked="" type="checkbox"/> Continuation-in-part of (see application data sheet and specification)</p> <p>b. <input type="checkbox"/> Cancel in this application original claims _____ of the prior application before calculating the filing fee. (At least one claim must remain.)</p> <p>c. <input type="checkbox"/> Amend the specification by inserting before the first line the sentence: This is a <input type="checkbox"/> continuation <input type="checkbox"/> divisional <input type="checkbox"/> continuation-in-part of application Serial No. _____</p> <p>d. <input type="checkbox"/> The prior application is assigned of record to _____</p>	

UTILITY PATENT APPLICATION TRANSMITTAL		Attorney Docket No. MBHB02-728-B (400/120)																																					
APPLICATION FEES																																							
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">BASIC FEE</th> <th colspan="2">\$ 750.00</th> </tr> <tr> <th>CLAIMS</th> <th>NUMBER FILED</th> <th>NUMBER EXTRA</th> <th>RATE</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td>36 -20 =</td> <td>16</td> <td>x \$18.00 \$ 288.00</td> </tr> <tr> <td>Independent Claims</td> <td>3 - 3 =</td> <td></td> <td>x \$84.00 \$</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Multiple Dependent Claims(s) if applicable</td> <td></td> <td>+\$280.00 \$</td> </tr> <tr> <td colspan="4" style="text-align: right;">Total of above calculations = \$ 1,308.00</td> </tr> <tr> <td colspan="4" style="text-align: right;">Reduction by 50% for filing by small entity = \$(519.00)</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Assignment fee if applicable</td> <td></td> <td>+ \$40.00 \$</td> </tr> <tr> <td colspan="4" style="text-align: right;">TOTAL = \$ 519.00</td> </tr> </tbody> </table>				BASIC FEE		\$ 750.00		CLAIMS	NUMBER FILED	NUMBER EXTRA	RATE	Total Claims	36 -20 =	16	x \$18.00 \$ 288.00	Independent Claims	3 - 3 =		x \$84.00 \$	<input type="checkbox"/> Multiple Dependent Claims(s) if applicable			+\$280.00 \$	Total of above calculations = \$ 1,308.00				Reduction by 50% for filing by small entity = \$(519.00)				<input type="checkbox"/> Assignment fee if applicable			+ \$40.00 \$	TOTAL = \$ 519.00			
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<p>19. <input checked="" type="checkbox"/> Please charge my Deposit Account No. 13-2490 in the amount of \$519.00</p> <p>20. <input checked="" type="checkbox"/> A check in the amount of \$519.00 is enclosed.</p> <p>21. The Commissioner is hereby authorized to credit overpayments or charge any additional fees of the following types to Deposit Account No. 13-2490:</p> <ol style="list-style-type: none"> <input checked="" type="checkbox"/> Fees required under 37 CFR 1.16. <input checked="" type="checkbox"/> Fees required under 37 CFR 1.17. <input checked="" type="checkbox"/> Fees required under 37 CFR 1.18. <p>22. The Commissioner is hereby generally authorized under 37 CFR 1.136(a)(3) to treat any future reply in this or any related application filed pursuant to 37 CFR 1.53 requiring an extension of time as incorporating a request therefor, and the Commissioner is hereby specifically authorized to charge Deposit Account No. 13-2490 for any fee that may be due in connection with such a request for an extension of time.</p>																																							
23. CERTIFICATE OF MAILING																																							
<p>I hereby certify that, under 37 CFR § 1.10, I directed that the correspondence identified above be deposited with the United States Postal Service as "Express Mail Post Office to Addressee," addressed to Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, on the date indicated below.</p>																																							
24. USPTO CUSTOMER NUMBER																																							
 20306 <small>PATENT TRADEMARK OFFICE</small>																																							
McDonnell Boehnen Hulbert & Berghoff																																							
25. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED																																							
Name	Anita J. Terpstra, Ph.D.																																						
Reg. No.	47132																																						
Signature																																							
Date	June 27, 2003																																						

UTIL (Rev. 11/21/00)